

PLEASE READ INSTRUCTIONS THOROUGHLY!

Please complete the attached Street Closing Application and return it with the applicable fee to the City of Jamestown, 102 3rd Avenue SE, Jamestown, ND 58401.

- 1. Requests for street closing must have City Auditor's Office approval a minimum of seven (7) days prior to the scheduled date of closing. Fees for the closing must be paid seven (7) days prior to the scheduled date of closing.**
- 2. Permit fees will be non-refundable if the closing is cancelled less than forty-eight (48) hours prior to the scheduled closing.**
- 3. Center area of street must remain clear for emergency vehicles.**
- 4. Application Fee:**

COMMERCIAL: \$75.00 for the 1st day – \$25.00 each succeeding day

RESIDENTIAL:

- a) \$75.00-City will set up and remove barricades (\$25.00 each succeeding day)**
- b) \$25.00-City delivers and picks up cones from site (Applicant provides set up)**
- c) No charge-Applicant provides personal cones at site (Applicant provides set up)**
(Must be minimum of 28 inches in height)

PARADES:

- 5. Contact the Police Department and speak to the Supervisor that will be working the date and time of the parade.**

The City Administrator may refer the request for a street closing to the City Council for action by said body at its next regular or special council meeting or appropriate committee meeting.

**CITY OF JAMESTOWN
102 3RD AVENUE SE
JAMESTOWN, NORTH DAKOTA 58401
TELEPHONE 701-252-5900 - FAX 701-252-5903**

STREET CLOSING APPLICATION
MUST BE SUBMITTED A MINIMUM OF 7 DAYS PRIOR TO STREET CLOSING

APPLICATION FEE:

COMMERCIAL: ____ \$75.00 For the 1st day – \$25.00 each succeeding day

RESIDENTIAL: ____ \$75.00 - City will set up and remove barricades (\$25.00 each succeeding day)
____ \$25.00 - City delivers and picks up cones from site (Applicant provides set up)
____ No charge - Applicant provides personal cones at site (Applicant provides set up)
(Must be minimum of 28 inches in height)

1. NAME OF APPLICANT _____

2. MAILING ADDRESS: _____

CITY

STATE

ZIP CODE

3. EMAIL ADDRESS _____

4. BUSINESS PHONE NO. _____ **HOME PHONE NO.** _____

5. STREET TO BE CLOSED: (Center area of street must remain clear for emergency vehicles)

6. DATE & HOURS STREET IS TO BE CLOSED: _____

7. EVENT FOR WHICH STREET IS TO BE CLOSED:

Auction Sale ____ Block Party ____ Parade ____ Tree Cutting ____ Utility Work ____

Other: _____

DATED THIS _____ **DAY OF** _____, 20 _____.

SIGNATURE OF APPLICANT

CITY HALL USE ONLY

Date Application received: _____ **Received by:** _____

Application Fee Received: Yes ____ No ____

Request Approved By: _____ **Date:** _____

Date Police Department, Public Works Department, Fire Department, Jamestown Ambulance, James River Transit Notified: _____